

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexendric Virginic 22212

/

	Alexandria, Virginia 22313-1450 or Fax (703) 746-4000						
INSTRUCTIONS: This form appropriate. All further corro- indicated unless corrected be maintenance fee notifications	elow or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and PUBLI	CATION FEE (if	required). Blocks 1 through 5 s ees will be mailed to the current iress; and/or (b) indicating a sep	hould be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE	ADDRESS (Note: Use Block 1 for	any change of address)	$70 \cdot \xi = \chi$	Note: A certificat	te of mailing can only be used f 1. This certificate cannot be used	or domestic mailings of the	
759	00 03/07/2005	(MAR 2 8 2005	Fee(s) Transmitta papers. Each addi have its own certi	1. This certificate cannot be used tional paper, such as an assignm ficate of mailing or transmission.	for any other accompanying ent or formal drawing, must	
John R. Thompson STORL TIVES LLF		H	MAR 2 8 2005		Certificate of Mailing of Tran	smissian	
201 South Main Stre		EX.	a put	States Postal Serv addressed to the	at this Fee(s) Transmittal is bein rice with sufficient postage for fin Mail Stop ISSUE FEE address USPTO (703) 746-4000, on the	st class mail in an envelope above, or being facsimile	
Suite 1100 Salt Lake City, UT {	84111		RADEMON	transmitted to the	USPTO (703) 746-4000, on the	(Depositor's name)	
,						(Signature)	
					· · · · · · · · · · · · · · · · · · ·	(Date)	
APPLICATION NO.	FILING DATE	•	FIRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/990,403	11/21/2001		Mario Hieb		2741.2.3	3877	
TITLE OF INVENTION: EX							
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$300	\$1000	06/07/2005	
	EXAMINER		іт с	LASS-SUBCLASS			
TRAN, I		2637		375-302000			
CFR 1.363). Change of corresponde Address form PTO/SB/122 "Fee Address" indicatio PTO/SB/47; Rev 03-02 or Number is required.	Correspondence	registered attorney or agent) and the names of up to					
3. ASSIGNEE NAME AND F			-	•••			
recordation as set forth in 3	37 CFR 3.11. Completion o	f this form is NOT	a substitute for filin	g an assignment.	ssignee is identified below, the d 3/29/2005 AWDNDAF2 000000	locument has been filed for 71 09990403	
(A) NAME OF ASSIGNED	E	(B) RESIDENCE: (CIT	Y and STATE OR		700.00 DP 300.00 DP 15.00 DP	
Please check the appropriate a	ssignee category or categor	ies (will not be pri	nted on the patent) :	Individual	Corporation or other private gr	oup entity Government	
4a. The following fee(s) are en	nclosed:		Payment of Fee(s):		· · · · · · · · · · · · · · · · · · ·		
	all entity discount permitted		A check in the ar		is enclosed. 2038 is attached. Total Fo	ee \$1.015.00	
Advance Order - # of C			The Director is Deposit Account Nu	hereby authorized mber 50237	by charge the required fee(s), or 5 (enclose an extra c	credit any overpayment, to opy of this form).	
	ALL ENTITY status. See 3	7 CFR 1.27.	b. Applicant is no	o longer claiming S	MALL ENTITY status. See 37 C	FR 1.27(g)(2).	
The Director of the USPTO is NOTE: The Issue Fee and Pub interest as shown by the record	requested to apply the Issue blication Fee (if required) w ds of the United States Pater	e Fee and Publicat ill not be accepted nt and Trademark	ion Fee (if any) or to from anyone other t Office.	re-apply any previ han the applicant; a	ously paid issue fee to the applica registered attorney or agent; or the	ition identified above. ne assignee or other party in	
Authorized Signature	dn R flion	pto		Date	3/25/25		
Typed or printed name	John R. Thompso	n	. <u> </u>	Registra	tion No. <u>40,842</u>		
an application. Confidentiality submitting the completed appl this form and/or suggestions fi Box 1450, Alexandria, Virgini Alexandria, Virginia 22313-14	is governed by 35 U.S.C. lication form to the USPTC or reducing this burden, sho ia 22313-1450. DO NOT S 150.	122 and 37 CFR 1 D. Time will vary objuing the sent to the END FEES OR C	.14. This collection depending upon the Chief Information C OMPLETED FORM	is estimated to take individual case. An Officer, U.S. Patent IS TO THIS ADDF	by the public which is to file (and 12 minutes to complete, includir by comments on the amount of ti and Trademark Office, U.S. Dep RESS. SEND TO: Commissioner is it displays a valid OMB control	ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	

IPE								
CERTIFICATE OF	Docket No.							
Applicant(s): Mario H	50612/4.10							
Application No.	Filing Date		Examiner	Customer No.	Group Art Unit			
09/990,403	November 21, 2001	BADEMAD	Khai Tran	32642	2637			
Invention: EXCITER/PHASOR/TRANSMITTER FOR DIRECTIONAL ANTENNA SYSTEM								
I hereby certify that t	his <u>Transmittal of Pay</u>		Fee (including the items li Identify type of correspondence)	isted below)				
is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope								
addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on								
John R. Thompson								
(Typed or Printed Name of Person Mailing Correspondence)								
(Signature of Person Mailing Correspondence)								
Note: Each paper must have its own certificate of mailing.								
Transm	PTOL-Form 8 PTO-Form 20	35 Part B – Fe 38 charging	Issue Fee (Small Entit ee(s) Transmittal (1 pg the amount of \$1,015. rst Class Mail 37 (CFR	.) 00 (1 pg.)				
CUSTOMER NO. 32642								
		an a						

TRANSMITTAL OF PAYMENT OF ISSOE FEE (Small Entity)					Docket No.			
. (37 C.F.R. 1.311)						506	50612/4.10	
Applicant(s): Mario Hieb								
Appl	lication No.	Filing Date	RADEKERNINE		Customer No.	Group Art Unit	Confirmation No.	
09	/990,403	November 21, 2001	Khai Tra	n	32642	2637	3877	
Invention: EXCITER/PHASOR/TRANSMITTER FOR DIRECTIONAL ANTENNA SYSTEM								
Mail Stop Issue Fee COMMISSIONER FOR PATENTS <u>P.O. Box 1450</u> <u>Alexandria, VA_22313-1450</u>								
		h are the following fon nsmittal Form PTOL		ied applica	ition.			
	Jtility Fee:	\$ 700.00	_			Plant Fee:		
	Publication Fe	e: \$300.00	U					
	A check in the	amount of	is attac	ched.				
	The Director is hereby authorized to charge and credit Deposit Account No. 50-2375 as described below.							
Charge the amount of								
	Credit any overpayment.							
⊠ F		arge any additional fe						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
John R. Thompson Registration No. 40,842 Stoel Rives LLP One Utah Center 201 South Main Street, Suite 1100								
Salt Lake City, UT 84111 Telephone: 801-578-6994 Facsimile: 801-578-6999								
cc:								
Certificate of Transmission by Facsimile This certificate may only be used if paying by deposit account.				Mail				
a		this document and au facsimile transmitted to Office (Fax		with t first of Fee,	by certify that this he United States Post lass mail in an envi Commissioner for Pa 3-1450" [37 CFR 1.8 (Date)	stal Service with suff elope addressed to atents, P.O. Box 145	ficient postage as "Mail Stop Issue	
Signature Signature Of Person Mailing Correspondence						ndence		
	Typed or Pr	inted Name of Person Sign	ing Certificate	T	yped or Printed Name	of Person Mailing Co	orrespondence	